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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Docket Number 8 /		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR I	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED			FILED	NUMBER EXTRA		RATE	FEE		RATE	FEE
ASIC FEE 7 CFR 1 16(a))			-				s	OR		<u>\$</u>
OTAL CLAIMS 7 CFR 1.16(c))			minus 20 =			x s=		OR	x \$=	X_{-}
NDEPENDENT CLAIMS 57 CFR 1.15(b))		S	minus 3 =		•			OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT			(37	CFR 1.16(d))		+ 5=		OR	+ \$ =	
		olumn 1 is less than		r 10 in column 2		TOTAL		OR	TOTAL	
ii the										
	CL	AIMS AS AME	אטבט –	PARTII				OR	OTHER	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY T	٦	SMALL	ENTITY
ENDMENT A	717/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	6	Minus	·· 20	= 0	x s=		OR	x s=	
	tndependent (37 CFR 1.16(b))	. 1	Minus	" 3	= 0	x s=		OR	x s=	\angle
5 F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				R 1.16(d))	+s =		OR	+ s=	
	TROTTRESEN					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDME	Total (37 CFR 1.16(c))	AMENDMENT	Minus	••	=	x s=		OR	x s=	
	Independent (37 CFR 1.16(b))		Minus	***	=	x \$=		OR	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+\$ _=		OR	+ s=		
	FIRST FRESER					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	,	<u>,</u>	_		
STC		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
ME	Total (37 CFR 1.15(c))	AMENDMENT	Minus	**	=	x \$=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	†•	Minus	***	=	x \$=		OR	x \$=	<u> </u>
Æ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ \$= TOTAL	
Æ	FIRST FRESU					TOTAL	1		IUIAL	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Application or Docket Number 09904481 PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN TYPE [OR SMALL ENTITY (Cotumn 2) (Column 1) TOTAL CLAIMS ip RATE FEE RATE FEE BASIC FEE 355.00 710.00 BADIC FEE FOR NUMBER FILED NUMBER EXTRA OR 9/82 minus 20= TOTAL CHARGEABLE CLAIMS X\$ 9= X\$18= INDEPENDENT CLAIMS minus 3 = X80= X40= OR MULTIPLE DEPENDENT CLAIM PRESENT +270= +135-OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL 7/0 TOTAL OR OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) HICHEST CLANS ADOIL ADOL NUMBER PREVIOUSLY REMANNING TIONAL RATE TIONAL RATE AFTER EXTRA FEE FEE PAID FOR AMENDACEME X\$18= Total Vinus X\$ 9= OR X40= X80-OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR OR ADDIT. FEE ADDIT SEE (Column 3) (Column 2) CIANG ADDI-ADDI-8 MUMBER PREVIOUSLY REMAINING PRESENT TIONAL TIONAL RATE RATE EXTRA AFTER FEE FEE PAID FOR # NOMENT סכ X\$18= Total XS 9-OR Minus . X80-X40= OR PAST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR OR 23/4 (Solumn 1) ADDIT, FEE ADDIT. FEE (Column 2) (Column 3) CLANIS ADDI-TIONAL ADDI-NUMBER PREVIOUSLY PRESENT RATE RATE TIONAL AFTER EXTRA PND FOR FEE FEE O _U Total Minus •• X\$ 9= X\$18= OA Minus Independent X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR

" If the entry in column 1 is teen then the entry in eclumn 2, write "0" in column 2.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column."

ADDIT FEE